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Application Number	09/689,222
Filing Date	10/11/2000
First Named Inventor	Siddhartha Nag
Art Unit	2145
Examiner Name	Jeffroy R. Swearingen
Attorney Docket Number	59033-278849

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

Please change the correspondence address for the above-identified application to:

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature: 

Name: Siddhartha Nag

Date: November 4, 2005 Telephone: 732-687-1762

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

Total of _____ forms are submitted.

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